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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Jeffrey F. Worman, P.A.

Name of Corporation

DOCUMENT NUMBER: P08000024714

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey F. Worman

Name of Contact Person

Jeffrey F. Worman, P.A.

Firm/Company

13630 58th Street North, Suite #110

Address

Clearwater, FL 33760

City/State and Zip Code

jeff@wormanpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey Worman

..727

896-4488

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
 The name of The principal 	the corporation: Jeffrey F. Worman, P.A. I office address: 13630 58th St. N. Suite #110, Clearwater, FL 33760	•
3. The mailing a	address (if different): N/A	_
4. Date of incor	rporation/qualification: March 4, 2008 Document number: P08000024714	-
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Incorp Services, Inc.	
	17888 67th Ct. N.	
	Loxahatchee, FL 33470	
6. The name and (if changed):		
	Jeffrey F. Worman ASSR 73	•
	13630 58th St. N. Suite #110 P.O. Box NOT acceptable P.O. Box NOT acceptable	
	P.O. Box NOT acceptable Clearwater, FL 33760 P.O. Box NOT acceptable Clearwater, FL 33760))
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.	
	Jeffrey F. Worman, Pres.	
Thereby accent	t the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete If my duties, and I am familiar with and accept the obligation of my position as registered wis document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
	2/11/15	
Sig	nature of Registered Agent Date	
If signing on be	chalf of an entity:	
т	Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *